

2817
Patent
109934-39

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Stan Toncich

Serial No. 10/044,522

Filed: January 11, 2002

For: Tunable Planar Capacitor

Examiner: Justin P. Bettendorf

Art Unit: 2817

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I. DOCUMENTS ENCLOSED:

In response to the **Office Action**, which was mailed by the Patent Office on
March 3, 2003, enclosed are:

- ☒ Amendment in response to the Office Action dated March 3, 2003
- ☒ Request for Three Month Extension of Time
- ☒ Return Postcard

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CERTIFICATE OF MAILING
(37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

September 3, 2003
Date of Deposit

Troy M. Schmelzer
Name of Person Mailing Paper

Signature of Person Mailing Paper

II. REQUEST FOR EXTENSION OF TIME:

The proceedings herein are for a patent application and the provisions of 37 CFR § 1.136 (a) apply.

- ☒ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 (a) [fees: 37 CFR § 1.16(e)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$55.00	\$110.00
<input type="checkbox"/> two months	\$205.00	\$410.00
<input checked="" type="checkbox"/> three months	\$465.00	\$930.00
<input type="checkbox"/> four months	\$725.00	\$1450.00
<input type="checkbox"/> five months	\$985.00	\$1970.00
Fee		\$930.00

III. FEES FOR CLAIMS

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	0	-	20	=	0	x	\$18.00	\$0.00
Independent Claims	0	-	3	=	0	x	\$84.00	\$0.00
Multiple Dependent Claims	\$280.00	(if applicable)					<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity.							<input type="checkbox"/>	\$0.00
Three Month Extension of Time Fee								\$930.00
TOTAL FEES DUE HERewith								\$930.00

IV. METHOD OF PAYMENT OF FEES:

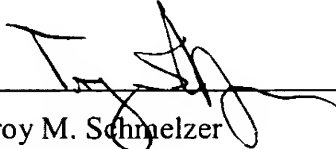
- ☒ A check in the amount of \$930.00 is enclosed to cover the above fee(s).
- ☒ The Commissioner is hereby authorized to charge Procopio's Deposit Account No. **50-2075** for any fees required and to credit any overpayment to said Deposit Account No. **50-2075**.

Should you have any questions, please do not hesitate to contact our office.

Respectfully submitted,

Dated: September 3, 2003

By: _____


Troy M. Schmeltzer
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